

## MISSOURI POET LAUREATE 2010 APPLICATION

Name:					
Last		First		Middle Initial	
Home Phone:	V	Work Phone:			
Cell Phone:					
Email:					
What other name names, and forme			anges, pen nam	es, nicknames, maiden	
Social Security No	•	Driver	's License No.:_		
* Gender:	Male	Female	* Ethnicity:		
				ographic statistics; it will	no
be used for any di	scriminatory o	r otherwise unlawful	purpose.		
* Marital Status: _	Single	Married Divo	orced Sepa	rated Widow	
* Spouse's Full Na	me:				
Are you a United S	States Citizen?		Missouri F	esident?	
How long have yo	u resided in M	lissouri?			
Current Residentia	al Address:				
		Street Address (	'No post office b	oxes, please!)	
 Citv	County		State		

Employer:		
Occupation:		
Education:		
High School	Dates Attended	Year Graduated
Postsecondary Education	Dates Attended	Certificate/Degree Received
Postsecondary Education	Dates Attended	Certificate/Degree Received
Postsecondary Education	Dates Attended	Certificate/Degree Received
Please describe in what p	ublication(s), and in what	year(s) your poetry has been published:
Please describe your action or publications in which y		unity over the last five (5) years (e.g., groups
matter of policy or pract	ice, denied or restricted in und, religion, or sexual or	to any membership organization that, as a membership or affiliation based on race, sex rientation, or has been subject to a claim that
identify and describe each for which the fine was less Yes No	ch such arrest, charge, or ss than \$100.) 	than a minor traffic violation? If so, please conviction. (Do not include traffic offenses
If yes, please provide det	alis.	

Is there anything in your or your spouse's background that might become an embarrassment you, your family, or the Governor if it were to become public? Please consider carefully a letters to the editor, blog posts, etc., which you or your spouse may have authored, ev anonymously.					
Yes No					
If yes, please explain.					
Have you or your spouse ever had any association with any person, group, or business venture that could be used, even unfairly, to discredit or attack your character and qualifications?  Yes No					
If yes, please describe.					
Have you or your spouse at any time belonged to any membership organization that, as a matter of policy or practice, denied or restricted membership or affiliation based on race, sex, disability, ethnic background, religion, or sexual orientation, or has been subject to a claim that it has done so?  Yes No If yes, please provide details.					
If you wish, please provide any additional information you would like considered in connection with your application for appointment as Missouri's next Poet Laureate:					

YES	NO	I am a resident of the State of Missouri.
YES	NO	I am a published poet, and am active in the poetry community.
YES	NO	I am willing and available to promote poetry in Missouri over the next 2 years.
YES	NO	I am the single creator of the works of poetry I am submitting.
YES	NO	I am at least 18 years of age.
YES	NO	If selected, the Office of the Governor of the State of Missouri and his designees have my permission to use my work sample or a portion thereof, my likeness, and my biographical information for publicity purposes.

Please document your eligibility by circling "Yes" or "No" in response to the following

questions:

## If you answered "No" to any of the above criteria, you are NOT eligible to serve as Missouri Poet Laureate.

I certify that I meet all eligibility requirements listed herein for appointment as Missouri Poet Laureate, and that all the information in this Application and its attachments are true and correct to the best of my knowledge, and that I have submitted a complete application.

Applicant's Signature	Date

In addition to completing application, you must submit a current resume (not a biography)
AND three (3) representative works of your poetry to:

Office of Governor Jeremiah "Jay" Nixon
ATTN: Boards and Commissions
Post Office Box 720
Jefferson City, MO 65101
Fax: 573-751-1495

E-mail: <a href="mailto:boards@mo.gov">boards@mo.gov</a> (.pdf format only)

ALL SUBMISSIONS, COMPLETE WITH ALL REQUIRED ATTACHMENTS, MUST BE RECEIVED IN OUR OFFICE NO LATER THAN WEDNESDAY, JANUARY 14, 2010 TO BE CONSIDERED.

Questions? Please contact our office: 573-751-5293.